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Prospective cohort study of the impact of counseling about artificial hydration and nutrition (AHN) for the elderly who cannot get enough oral intake

Ayako Miki a [Member, Senior Resident], Takahiko Tsutsumi a

aTakatsuki General Hospital

Background
In our super-aging society, numerous number of elderly are evaluated as being unable to get enough oral intake despite maximized medical intervention. AHN can provide fluid and nutrition which may result in better nutritional status or prognosis. On the other hand, the downside of AHN should be discussed which are often taken lightly.

Purpose
To evaluate the impact of detailed and precise counseling about AHN

Methods
We enrolled patients over 65-year-old with the principal diagnosis of aspiration pneumonia who were hospitalized to Takatsuki General Hospital (TGH) from September 2017 to February 2018. Speech therapists evaluated them and those whose dysphagia are too severe to get enough oral intake despite maximized medical intervention were registered (post-intervention group). Physicians counseled patients and their family about AHN based on current guidelines. We evaluated the initiation rate of AHN, comparing to similar population who were hospitalized to TGH from September 2016 to February 2017 (pre-intervention group).

Results
Twenty two patients were included in the pre-intervention group, and 10 were started on AHN. Ten patients were included in the post-intervention group, and only one patient chose AHN. Although it was not statistically significant, there was a tendency of less AHN initiation in post-intervention group (odds ratio, 7.1; 95% CI, 0.748-360). Post counseling questionnaires revealed positive impression about the counseling.

Conclusion
The counseling about AHN may have a positive impact on reducing futile AHN initiation. Detailed and precise explanation may reflect the preference of patients and their family, resulting in limitation of AHN only for those who truly wish.